

APPLICATION DATA SHEET

Application Information

Application Number::	Not yet assigned
Filing Date::	February 27, 2004
Application Type::	Regular
Subject Matter::	Utility
Suggested Classification::	
Suggested Group Art Unit::	
CD-ROM or CD-R?::	
Number of CD Disks::	
Number of Copies of CDs::	
Sequence Submission?::	
Computer Readable Form (CFR)?::	
Number of Copies of CFR::	
Title::	SYSTEM FOR INFLUENCE NETWORK MARKETING
Attorney Docket Number::	32824-201297
Request for Early Publication?::	
Request for Non-Publication?::	
Suggested Drawing Figure::	6
Total Drawing Sheets::	
Small Entity?::	No
Latin Name::	
Variety Denomination Name::	
Petition Included?::	
Petition Type::	
Licensed US Govt. Agency::	
Contract or Grant Numbers::	
Secrecy Order in Parent Appl.::	

Applicant Information

Applicant Authority Type:: Inventor
Primary Citizenship:: U.S.A.
Country:: U.S.A.
Status:: Full Capacity
Given Name:: John
Middle Name:: W.
Family Name:: HAWKS
Name Suffix::
City of Residence:: Sparks
State or Province of Residence:: Maryland
Country of Residence:: U.S.A.
Street of Mailing Address:: 15137 York Road
City of Mailing Address:: Sparks
State or Province of Mailing Address:: Maryland
Country of Mailing Address:: U.S.A.
Postal or Zip Code of Mailing Address:: 21152

Applicant Authority Type:: Inventor
Primary Citizenship::
Country::
Status:: Full Capacity
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Middle Name::
Family Name::
Name Suffix::
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State or Province of Residence::
Country of Residence::

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**State or Province of Mailing
Address::**

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Address::**

Correspondence Information

Correspondence Customer **26694**
Number::

Phone Number:: **(202) 344-4000**

Fax Number:: **(202) 344-8300**

E-Mail Address:: **masartori@venable.com**

Representative Information

Representative Customer **26694**
Number::

Domestic Priority Information

Application::	Continuity Type::	Parent Application::	Parent Filing Date::
This application is a	Continuation of	09/386,353	August 31, 1999
	Continuation of		
	Continuation of		
	Continuation of		

Foreign Priority Information

Country::	Application Number::	Filing Date::	Priority Claimed::

Assignee Information

Assignee Name:: COMSORT, INC.
Street of Mailing Address:: 222 Schilling Circle, Suite 150
City of Mailing Address:: Huntvalley
State or Province of Mailing Address:: Maryland
Country of Mailing Address:: U.S.A.
Postal or Zip Code of Mailing Address:: 21031